Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name JIMMY JOHN'S #1139 Address 3001 CHARLESTOWN CROSSING WAY, NEW ALBANY Owner				Telephone Number Est 812-725-8580 Own 617-519-3355 Purpose	Date of Inspection 01/05/2021 Follow Up	ID#	
83 SUBS, LLC/ JAY PAGE Owner's Address 5308 ROCK RIDGE DR LOUISVILLE, KY 40241-				X Routine Follow-up Complaint	Menu Type 1 2 _X 3 4 5		
Person in Charge JOVAL HAYES Responsible Person's Email				Pre-Operational Temporary HACCP			
Certified Food Handler JOVAL HAYES				Other (list)	1 _ 2 4 0 .	_ · _ · _	
		IST AND NARRATIVE COLUM CTIONS ARE DENOTED IN THE		D IN THE NARRAIVE COLUMN MARKED AS "R"			
Section #	ion# C NC R Narrative				To Be Corrected		
Summary of V			_1R0_				
Received by (name and title printed): JOVAL HAYES				Inspected by (name and title printed): A.J. Ingram CHIEF FOOD SPECIALIST			
Received by (signature):				Inspected by (signature):	·		
cc:			cc:		cc:		